

ORDER FOR SUPPLIES OR SERVICES										PAGE 1 OF 5		
1. CONTRACT PURCH ORDER/AGREEMENT NO. <div style="border: 1px solid black; padding: 2px;">DAAE20-00-D-0024</div>			2. DELIVERY ORDER/CALL NO. <div style="border: 1px solid black; padding: 2px;">0008</div>		3. DATE OF ORDER/CALL (YYYYMMDD) <div style="border: 1px solid black; padding: 2px;">2003MAR04</div>		4. REQUISITION/PURCH REQUEST NO. <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>		5. PRIORITY <div style="border: 1px solid black; padding: 2px;">DXA5</div>			
6. ISSUED BY TACOM-ROCK ISLAND AMSTA-LC-CAC-A GAIL BINDEWALD (309)782-3656 ROCK ISLAND IL 61299-7630 EMAIL: BINDEWALDG@RIA.ARMY.MIL			CODE <div style="border: 1px solid black; padding: 2px;">W52H09</div>		7. ADMINISTERED BY (If other than 6) <div style="border: 1px solid black; padding: 2px;">DCMA ORLANDO 3555 MAGUIRE BOULEVARD ORLANDO FL 32803-3726</div>			CODE <div style="border: 1px solid black; padding: 2px;">S1002A</div>		8. DELIVERY FOB <div style="border: 1px solid black; padding: 2px;"><input checked="" type="checkbox"/> DESTINATION <input type="checkbox"/> OTHER (See Schedule if other)</div>		
9. CONTRACTOR <div style="border: 1px solid black; padding: 2px;">LITTON SYSTEMS INC LASER SYSTEMS DIV 2787 S ORANGE BLOSSOM TRAIL APOPKA FL 32703</div>			CODE <div style="border: 1px solid black; padding: 2px;">34860</div>		FACILITY <div style="border: 1px solid black; padding: 2px;"></div>		10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>			11. X IF BUSINESS IS <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED</div>		
NAME AND ADDRESS <div style="border: 1px solid black; padding: 2px;">TYPE BUSINESS: Large Business Performing in U.S.</div>			12. DISCOUNT TERMS <div style="border: 1px solid black; padding: 2px;"></div>		13. MAIL INVOICES TO THE ADDRESS IN BLOCK <div style="border: 1px solid black; padding: 2px;">See Block 15</div>							
14. SHIP TO <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>			CODE <div style="border: 1px solid black; padding: 2px;"></div>		15. PAYMENT WILL BE MADE BY <div style="border: 1px solid black; padding: 2px;">DFAS COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P O BOX 182264 COLUMBUS OH 43218-2264</div>				CODE <div style="border: 1px solid black; padding: 2px;">HQ0338</div>		MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2	
16. TYPE OF ORDER <div style="border: 1px solid black; padding: 2px;">DELIVERY/CALL <input checked="" type="checkbox"/> PURCHASE <input type="checkbox"/></div>												
THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT.												
Reference your <input type="checkbox"/> Oral <input type="checkbox"/> Written Quotation _____, Dated _____. furnish the following on terms specified herein.												
ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.												
NAME OF CONTRACTOR _____ SIGNATURE _____ TYPED NAME AND TITLE _____ DATE SIGNED (YYYYMMDD) _____												
<input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:												
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>												
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICE				20. QUANTITY ORDERED/ACCEPTED*		21. UNIT	22. UNIT PRICE		23. AMOUNT	
		SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price KIND OF CONTRACT: Supply Contracts and Priced Orders										
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.						24. UNITED STATES OF AMERICA DAVE ELLIOTT /SIGNED/ ELLIOTTD@RIA.ARMY.MIL (309) 782-3814 BY: _____ CONTRACTING/ORDERING OFFICER				25. TOTAL \$2,932,155.00		
27a. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED												
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE						c. DATE (YYYYMMDD)		d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE				
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE						28. SHIP. NO.		29. D.O. VOUCHER NO.		30. INITIALS		
f. TELEPHONE NUMBER						g. E-MAIL ADDRESS						
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.						31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR		
a. DATE (YYYYMMDD)		b. SIGNATURE AND TITLE OF CERTIFYING OFFICER								34. CHECK NUMBER		
										35. BILL OF LADING NO.		
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.		

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN DAAE20-00-D-0024/0008 MOD/AMD	Page 2 of 5
Name of Offeror or Contractor: LITTON SYSTEMS INC		

SUPPLEMENTAL INFORMATION

- 1. This delivery order is for 115 each "E" Configuration Eyesafe Laser Rangefinders, P/N 12972530-2. Carcasses will be provided so this order is based on the upgrade price.
- 2. The delivery schedule is set forth in the following Section B.
- 3. The total amount of this order is \$2,932,155.00.

*** END OF NARRATIVE A 001 ***

Name of Offeror or Contractor: LITTON SYSTEMS INC

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	SUPPLIES OR SERVICES AND PRICES/COSTS				
0001	NSN: 1240-01-497-9758 FSCM: 00000 PART NR: 12972530-2 SECURITY CLASS: Unclassified				
0001AA	PRODUCTION QUANTITY NOUN: ENH EYESAFE LASER R/F PY6 AIM PRON: 473ESM0147 PRON AMD: 01 ACRN: AA AMS CD: 31206406019 <u>Packaging and Marking</u> <u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin <u>Deliveries or Performance</u> DOC SUPPL <u>REL_CD</u> <u>MILSTRIP</u> <u>ADDR</u> <u>SIG_CD</u> <u>MARK FOR</u> <u>TP_CD</u> 001 W56HZV3049D051 W91Q7R M ABRAMS 1 <u>PROJ_CD</u> <u>BRK BLK PT</u> GGX <u>DEL REL_CD</u> <u>QUANTITY</u> <u>DEL DATE</u> 001 11 30-JAN-2004 002 10 28-FEB-2004 003 11 30-MAR-2004 004 10 30-APR-2004 005 10 30-MAY-2004 006 11 30-JUN-2004 007 11 30-JUL-2004 008 11 30-AUG-2004 009 8 30-SEP-2004 010 11 30-OCT-2004 011 11 30-NOV-2004 FOB POINT: Destination SHIP TO: <u>PARCEL POST ADDRESS</u> (W91Q7R) PR WOLX ANNISTON DEPOT PROP DIV 7 FRANKFORT AVENUE GPS BUILDING 113 ANNISTON AL 61299-5000	115	EA	\$ 25,497.00000	\$ 2,932,155.00

Name of Offeror or Contractor: LITTON SYSTEMS INC

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	<div>MARK FOR: AKZ PM OWNED ASSETS</div> <div>PURPOSE CODE 9</div> <div>PROJECT CODE GGX</div> <div>ABRAMS RETROFIT PROGRAM</div> <div><u>CONTRACT/DELIVERY ORDER NUMBER</u></div> <div>DAAE20-00-D-0024/0008</div>				

Name of Offeror or Contractor: LITTON SYSTEMS INC

CONTRACT ADMINISTRATION DATA

							JOB		
LINE	PRON/	OBLG					ORDER	ACCOUNTING	OBLIGATED
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>			<u>NUMBER</u>	<u>STATION</u>	<u>AMOUNT</u>
0001AA	473ESM0147	AA	2	21	32033000035R5R02P31206431E9	S20113	3GAAPM	W56HZV	\$ 2,932,155.00
31206406019									
								TOTAL	\$ 2,932,155.00
SERVICE							ACCOUNTING		
<u>NAME</u>	<u>TOTAL BY ACRN</u>		<u>ACCOUNTING CLASSIFICATION</u>				<u>STATION</u>	<u>AMOUNT</u>	
Army	AA		21	32033000035R5R02P31206431E9	S20113		W56HZV	\$ 2,932,155.00	
								TOTAL	\$ 2,932,155.00